Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

		SMALL	SMALL ENTITY			OTHER	THAN					
	TAL 61 411.55		(Column	1)	(Column 2)		TYPE	TYPE			SMALL	
TOTAL CLAIMS			ろ ろ		1944 - 1 C C C C C C C C C C C C C C C C C C		RATE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC F	EE (	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		· Ø		X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			ح minus 3 =		* 80		X40=			OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=			OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in						olumn 2	TOTA	- \	555	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1) (Column 2) (Column 3)							SMAL	LEN	YTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	1	HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 4	Minus	** 2	20	=	X\$ 9=			OR	X\$18=	
AME	Independent	* / NTATION OF M	Minus  JI TIPLE DEP	FNDFN	Z T CLAIM		X40=			OR	X80=	
<u> </u>			JETH EZ DZ,	LNDLN	i OE/ (III)		+135=			OR	+270=	
							TOT ADDIT. FI			OR	TOTAL ADDIT. FEE	
		ADDI1.11				/ DOTT. T C.E.						
AMENDMENT B	\$	CLAIMS REMAINING AFTER AMENDMENT	1	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 4	Minus	2	00	=	X\$ 9=			OR	X\$18=	
	Independent	2	Minus	*** 2	<u> </u>	=	X40=	Ť		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		+135=			OR	+270=	
								AL.			TOTAL	.;
								EL		JOI 1	ADDIT. FEE	
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)				1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 4	Minus	ك	0	=	X\$ 9=			OR	X\$18=	
	Independent	2	Minus	***	<u>3</u> _	<b>/</b>	X40=	1	**	OR	X80=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							十				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+135=			OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								E L		OR	TOTAL ADDIT. FEE	
		imber Previously Pa nber Previously Pa							opriate box			